Self-certification Form

Appendix F

Revision 01, December 2002

Self-Certification Form for Employees Participating in *Lake Guardian* **Science Operations**

1,	, н	AVE BEEN IK	AINED, CERTIFIED, AND/OR
CLEA	RED IN:		
1.	24-hour Laboratory Safety Course / 4-hour Laboratory Safety Refresher Course		
	Date:	/ Date:	
2.	*EMT		
	Date:		
	Site-specific bloodborne pathogen t	raining	yes / no
	I have been offered a Hepatitis B va	accination	yes / no
3.	Medical Monitoring clearance for specific <i>Lake Guardian</i> duties (primarily laboratory operations)		
	Date:		
4.	I have reviewed the current version of the <i>Sampling and Analytical Procedures</i> for GLNPO's Open Lake Water Quality Survey of the Great Lakes, or have participated in the Standard Operating Procedure training, and understand my duties in the survey.		
	Date:		
Sian	ature:		Date:
Signo			Daic

^{*} Applies only to Chief Scientists and Shift Supervisors, or to other first responders.